EHR Incentive News

Reminders:

Information which will assist you —and the latest updates — is available on the TennCare EHR Incentive website.

Accepting attestations from all returning eligible providers beginning January 1. All Program Year 2018 attestations must be submitted by 11:59 P.M. Central Time on March 31, 2019.

EHR Incentive Payments to Date:

EPs: $155,141,529

EHs: $131,439,176

Total: $286,580,705

EHR Incentives Paid to Date:

EPs: 10,518

EHs: 298

Total: 10,816

This Is the Year to Submit Your Next EHR Incentive Attestation

The final tweaks are in and TennCare's Provider Incentive Payment Program (PIPP) software is ready beginning January 1, 2019 for all Eligible Professionals (EPs) to attest for a 2018 EHR Incentive.

In order to attest, you must have successfully attested to and received payment for at least one previous year of the EHR Incentive program. Providers must be able to meet the requirements for eligibility, patient volume, Meaningful Use, and Clinical Quality Measure (CQM) criteria in order to qualify for an incentive payment.

We strongly encourage all providers who remain eligible in PIPP to attest for the 2018 program year (PY). Attesting now will allow you to avoid the coming "time crunches" in the program.

The "crunches" will be coming about because for the final three years of the program — 2019, 2020, and 2021 — we anticipate shortening the submission period from 90 days to 60 days, similar to the Medicare version. In addition attestations for 2020 and 2021 will both need to be completed during the 2021 calendar year. The program's time frame is mandated by the Centers for Medicare and Medicaid Services (CMS), and they maintain it cannot be changed.

You will find that by attesting sooner (in January or at least by February) rather than later (March), you will have more time to complete and submit your PY 2018 attestations, and more time to make corrections should any of your attestations be returned to you.

If you know providers in or outside your group who have skipped years in the program, don't let them pass up this opportunity!

If you have questions about attesting with PIPP, contact the EHR Provider Incentive Unit at TennCare.EHRIncentive@tn.gov. If you have questions about attesting to Meaningful Use, contact Edith Murphy, Meaningful Use Clinical Educator, at ehrmeaningfuluse.tenncare@tn.gov. Place "Attn: Edith Murphy" in the subject line.

Remember, you must submit PY 2018 attestations by 11:59 Central Time, March 31, 2019

MARCH 31

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Greenway Notifies CMS of EHR Software Problems

Fixes Coming, Just Not Soon

TennCare is aware of the recent CMS announcement concerning Greenway Health LLC and the problems they are having with their EHR systems. We do not know the extent of the problems or how long the fixes will take.

If you are using a ***Greenway product*** please do not submit your Program Year 2018 attestation until we notify you that we are ready to accept these attestations. We will send information by email — blast notice and EHR Newsletter — when we are ready.

Providers may email us at TennCare.EHRIncentive@tn.gov with questions, but until Greenway resolves the situation, there is little information on the subject we can provide.

Tennessee Immunization Program to Mail Connection Status Letters

The Tennessee Immunization Program (TIP) will be sending out its bi-annual "Meaningful Use letter" in January 2019. This letter is to inform providers about the status of their electronic health record system connection to the Tennessee Immunization Information System (TennIIS) and how many messages TennIIS received in 2018 from each organization.

The letter may be used for Meaningful Use audits and Meaningful Use attestation requests. An updated version of this letter is sent every 6 months to the TennIIS Point of Contact email that TIP has on file for each organization.

Please email TennIIS.MU@tn.gov if you would like to receive this letter for your organization. Please include your name, email, and the name and address of your organization so that we can update your organization's contact information in TennIIS.

A new feature that will be added in this letter is the number of queries (QBP messages) that TennIIS received from your organization if you implemented bi-directional transport. If interested in bi-directional transport, please work with your EHR vendor and contact the TennIIS team when you and your EHR vendor are ready to start testing query and response messages.

Clinical Decision Support and Meaningful Use

The Meaningful Use Modified Stage 2 and Stage 3 final rule requires that eligible professionals implement five clinical decision support (CDS) interventions/rules that are focused on improving performance on high priority health conditions. These rules should be related to 4 or more clinical quality measures (CQMs) at a relevant point in care for the entire EHR reporting period. Absent 4 or more CQMs related to EPs scope of practice, or patient population the clinical decision support intervention must be related to high-priority health conditions.

What are the important aspects that qualify a CDS rule for Modified Stage 2 and Stage 3 of Meaningful Use?

CDS is not simply an alert, notification, or explicit care suggestion. CDS encompasses a variety of tools including, but not limited to: computerized alerts and reminders for providers and patients; clinical guidelines; condition-specific order sets; focused patient data

CDS Rule Screenshot Example

reports and summaries; documentation templates; diagnostic support; and contextually relevant reference information. These functionalities may be deployed on a variety of platforms (e.g. mobile, cloud-based, and installed). CDS is not intended to replace clinician judgment, but rather is a tool to assist care team members in making timely, informed, higher quality decisions. The "Five Rights" concept provides a best practice framework that providers may consider in considering CDS options appropriate for their practice. The Five Rights concept states that in order to provide these benefits, CDS interventions must provide:

- The right information (evidence-based guidance, response to clinical need),

- To the right people (entire care team – including the patient),

- Through the right channels (e.g., EHR, mobile device, patient portal),

- In the right intervention formats (e.g., order sets, flow-sheets, dashboards, patient lists),

- At the right points in workflow (for decision making or action).

When attesting, for each CDS rule 1-5:

- Enter a clear and specific name of the clinical decision supported by the EHR.

- Enter explanation of how the EHR incorporates CDS rule:

  - What does it do?

  - How does this support patient care?

- Enter the Clinical Quality Measure or high priority health condition that is used to track the CDS rule.

If you have Meaningful Use attestation questions or are in need of technical assistance, please email: EHRMeaningfulUse.TennCare @tn.gov

Electronic Health Record CDS Intervention Example

Require Employees, Consultants to Maintain Safety, Security for Your PIPP Account

Whether your Business Manager, Credentialing Assistant, or a consultant…

Whether your employee, on your parent company's staff, or a contractor…

You should always require the person who creates your EHR Provider Incentive Payment Program (PIPP) attestation to follow best practices with all login, password, and security information. To maintain safety for your office information and security for your account, the user should never share passwords and security data with another — even in the same office.

Any time an account-holding employee leaves or a consultant is no longer retained, an abandoned account can delay some TennCare-related business. In the case of the EHR Provider Incentive Payment Program, an attestation might need to be completed so that a payment can be made. This is why the time to begin planning to obtain a new user account for a new person — even if the account will be a temporary backup— is before the departing employee leaves. Also be aware of the proper process and forms to reduce delays in properly making these requests in a tight situation.

A provider's PIPP user account is a single-user account, therefore only one person at a time can be the registered user. Never ask your departing employee to simply provide all login information to the next person in line for the job. Always have an authorized person in your office contact the TennCare EHR Incentive office at TennCare.EHRincentive@tn.gov to allow us to assist you in the transition. We will delete the current user account and provide you with the instructions to set up an account for the new user. Make sure you also include this procedure in your backup plan should an employee leave suddenly.

The holder of your PIPP account is responsible for their own user name, password, and answers to security questions. Never ask for them or require that person to share them with another.

If you have trouble with your PIPP account or cannot for any reason access it, please contact TennCare.EHRincentive@tn.gov.

2019 Tennessee Reportable Disease Lists Are Now Available

The diseases, events, and conditions reportable to Tennessee Department of Health (TDH) by healthcare providers, laboratories, including laboratories in healthcare facilities are available for 2019. See the following links for more detail:

2019 Tennessee Reportable Disease List for HEALTHCARE PROVIDERS

2019 Tennessee Reportable Disease List for LABORATORIES

TDH has published a helpful Summary of Public Health Reporting for 2019 and has established a new online reporting option that will be available to use in January 2019. Reporters can enroll now by requesting an account at ceds.informatics@tn.gov.

More information about reporting is available on the Reportable Diseases website at https://www.tn.gov/health/cedep/reportable-diseases.html. For questions, contact Communicable Environmental Diseases and Emergency Preparedness (CEDEP) at (615) 741-7247 or (800) 404-3006.

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State to Issue 1099s for EPs Who Received EHR Incentive Payments during 2018

The State of Tennessee will issue individual 1099s to Eligible Professionals (EPs) who have received EHR Incentive Payments during 2018. The mailing will occur by January 31, 2019. EPs do have the option to assign their EHR Incentive Payment to their Group Practice or Clinic, however, IRS guidelines requires the issuance of Form 1099 to the EP.

The 1099 is an informational return that is also provided to the IRS. To determine if payments are taxable, you must consult your tax professional. The EP is responsible for selecting the appropriate option in the CMS Registration and Attestation System, whether the EP is to receive the EHR

Incentive Payment or it is to be made to a designated Payee NPI (one with which the EP has a contractual relationship). The payment can be designated to a different entity for each year of program participation, but cannot be divided during a single year of program participation.

CMS, the Bureau of TennCare, and the EHR Provider Incentive Payment Program are not responsible for decision-making or mediation regarding the assignment of EHR Incentive Payments.

In most cases the EHR Incentive Payment itself is distributed to the group practice. When this occurs, it is the responsibility of the EP to report the payment on

Form 1099-MISC to the employer or entity which bills for the EP's services. Contact your employer to obtain the tax ID number to be entered on the Form 1099-MISC.

Again, EPs are strongly encouraged to contact their tax professional on the proper handling of this matter.

EPs who lose their 1099 or otherwise need a replacement should contact F&A Accounts, Supplier Maintenance at F_A.Accounts@tn.gov. (There is an underscore [_] between the F and the A.) In your message, please provide the tax year for which the 1099 is needed, Tax ID number, name, and either an email address, fax number, or current mailing address where the replacement 1099 can be sent.

Any questions about the EHR Provider Incentive Payment Program should be sent to TennCare.EHRIncentive@tn.gov. F&A Accounts, Supplier Maintenance is NOT able to assist you with EHR Program-related questions.
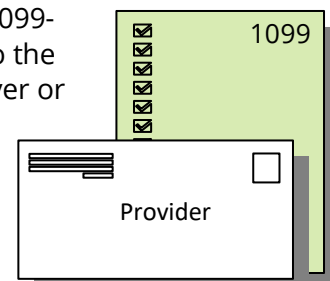
Setting Up Your EHR System to Interface Bi-directionally with TennIIS

The Tennessee Immunization Information System (TennIIS) allows Electronic Health Record (EHR) systems to interface bi-directionally in support of the Centers for Medicare and Medicaid Services (CMS) Promoting Interoperability Programs.

First it is important for you and your EHR vendor to review the TennIIS onboarding instructions if your organization has not yet registered its intent to exchange immunization data.

If your organization has already registered in the Trading Partner Registration (TPR) system and your EHR vendor is prepared to support the CMS 2015 Certified EHR Technology bidirectional requirements, send an email request for bidirectional testing to TennIIS.MU@tn.gov. The TennIIS team will list the date that the connection between your organization's EHR system and the TennIIS Staging environment is set-up as the bi-directional MU Stage III/MIPS start date.

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Resolve This Year to Attest with *EXACT* Location Addresses on Your 2018 Attestation

If you are among those who make New Year's Resolutions each year (or even just thibnk about it), we in the TennCare EHR Incentive Office would like you to make one for us! When you attest this year, be sure to enter on your 2018 attestation the "**Primary Business Address**" *EXACTLY* as it's listed on your CMS Registration and Attestation and TennCare Provider Registration Portal profiles (for the time period covered by your attestation).

If the practice location addresses do not match, your attestation will be returned for correction.

When you registered or updated your profile as a TennCare-participating provider through CAQH, you gave us your primary practice location. And if you were/are a member of a group with multiple locations, or practice in multiple locations, you gave us those additional locations as well.

When you went to the CMS Medicare & Medicaid EHR Incentive Program Registration and Attestation System (RNA) website to enroll and participate in the EHR Incentive Program, you completed a page titled "Business Address & Phone Number". CMS clarified that you should enter your primary practice location for "business address". If anything changes affecting your EHR Incentive registration, you must make corrections at the CMS RNA website. If such changes impact what you have entered in the NPPES website, you *must* go to NPPES to make the corrections. Data from the CMS RNA website **DOES NOT** transfer to NPPES. You are required to update NPPES directly.

Check your profiles *before* you attest. If the addresses do not match...

1. Correct TennCare's Provider Registration Portal:

If you are listed as an individual or sole proprietor, you will need to log into the CAQH application (https://proview.caqh.org/Login) to make the update to your primary practice location address.

If you are registered as a member of a group, your group will need to log into the TennCare Provider Registration Portal: https://pdms.tenncare.tn.gov/Account/Login.aspx

- Select **"update registration".** Then select each link on the left side of the screen from the Identification section through the Agreements section. Review information in each section and select "save", then "next". In the Practice Locations section, select the edit icon on the far right after the Primary Practice Address. In the next box, edit the address to match as needed. Now select "Submit to TennCare" to submit the change. For assistance, please contact Provider.Registration@tn.gov.

- If you have additional practice locations listed and need to make changes, or have practice locations to add, scroll down the page and follow the same steps as above.

2. Correct your CMS EHR Registration Profile:

Return to this CMS website: https://ehrincentives.cms.gov/hitech/login.action

- Enter the CMS Registration Number you were originally given upon enrollment

- Click on "**Modify**"

- On *EACH* page, click "Save & Continue"

- On the "**Business Address & Phone Number**" page, make the needed change(s), then click "Save & Continue"

- On the last page, click "Submit"

- For this process to be successful, it is *important* that you:

  - On **each and every page**, all the way through, click "**Save & Continue**" whether or not you made changes to that page.

  - At the end, after making any and all changes, click "**Submit**." If you do not click "Submit", your changes will not be sent to TennCare.

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With EHR Incentive Program questions and questions regarding eligibility, contact TennCare.EHRIncentive@tn.gov

For help with MU pages, please contact Edith Murphy, Clinical Nurse Educator, at EHRMeaningfulUse.TennCare@tn.gov. Place "Attn: Edith Murphy" in the subject line.

For CMS issues, contact the CMS Help Desk at NLRProdSupport@cms.hhs.gov or (833) 238-0203 (toll free). Hours of operation are Monday to Friday, 8:00 a.m. to 5:00 p.m. Eastern Time. Voicemail is available of outside regular operating hours.

View TennCare Medicaid EHR Incentive Program online assistance at

- Program website
- How-to PowerPoint Presentations
- FAQs
- Acronyms & Glossary
- Previous issues of EHR Incentive News

As always, anytime you have a question or need assistance, please contact us. We will get back to you as quickly as possible. Please be sure to include the provider's name and NPI when contacting us.

TennCare E-Newsletters: If you choose to unsubscribe from this list at any time, you may do so by sending a message to: listserv@listserv.tn.gov, (no subject) and unsubscribe MedicaidHIT. You will receive an email confirming your removal.

One More Thing Before You Attest: Update Your Email Address

The return email address on your EHR Incentive attestation is populated by the contact information you entered at the CMS Registration & Attestation System website when you first registered for the program. To update your email address and ensure you are receiving all communication from the TennCare EHR Incentive program, follow these instructions:

- Go to the CMS Registration & Attestation System website, https://ehrincentives.cms.gov/hitech/login.action
- Enter the CMS Registration Number you were originally given
- Click on "Modify"
- As you go through **EACH** page, click "Save & Continue"
- On the appropriate page(s), enter your current email address, then click "Save & Continue"
- On the last page, click "Submit"

This will save your information and cause CMS to resend your information back to us for processing within 24–48 hours. Should you need help with the CMS website, contact their help desk at NLRProdSupport@cms.hhs.gov or (833) 238-0203 (toll free). Hours of operation are Monday to Friday, 8:00 a.m. to 5:00 p.m. Eastern Time. Voicemail is available outside of regular operating hours.